

APPLICATION

**Community Development Block Grant Program
2006/2007 General Allocation**

With a Focus on Public Works Activities



**STATE OF CALIFORNIA
Department of Housing and Community Development
Financial Assistance Division
Community and Economic Development Section
Community Development Block Grant Program (CDBG)
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STATE OF CALIFORNIA

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BUSINESS, TRANSPORTATION AND HOUSING AGENCY

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ATTENTION:

- IMPORTANT SUBMITTAL INSTRUCTIONS -

All applications must be received by 5:00 P.M. on November 3, 2006.

Applications received by the Department after 5:00 P.M., November 3, 2006, will not be accepted and will be returned to the jurisdiction regardless of postmark/ mailing date

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Instructions for
APPLICATION CHECKLIST
&
ACTIVITY CHECKLISTS

Contents of Application: The Application is divided into two major sections. Most entries are self-explanatory. Where Instructions are needed, they are located in front of each section of the Application.

Section	Content
Application Sections	<p>Part A.</p> <ul style="list-style-type: none"> • Application Summary Forms <p>Part B.</p> <ul style="list-style-type: none"> • Required Certifications and Documentation <p>Part C.</p> <ul style="list-style-type: none"> • Capacity • Other Funding Sources • Program Income
Activity Forms	<ul style="list-style-type: none"> • description of proposed activity • documentation of need • sources and uses form • readiness charts

Timelines:

Activity	Date
NOFA Release Date	August 15, 2006
Application Release Date	August 25, 2006
Application DEADLINE	November 3, 2006 (5:00 p.m.)
Housing Element CDBG Compliance	December 3, 2006
AWARDS ANNOUNCED	January 31, 2007

Important Notes:

- **Original Hard copy of Application must be “physically” received** in the Department by 5:00 P.M. on November 3, 2006.
- Late or applications not meeting threshold will **not** be considered for funding.
- Tele-faxed applications will **not** be accepted.
- Additional information that could enhance the competitiveness of the application will **not** be accepted after the application deadline.
- The Department reserves the right to request additional information as a special condition to the grant agreement.

Required Number of Copies:	Items Required:
One	Complete original set (with original signatures, in blue ink) of the entire application and all attachments; <u>and</u>
	In the front pocket of the original application set, include:
One	Additional copy of the authorizing Resolution for the submittal of the application, and
One	Additional copy of all forms in Part A; and
One	Additional copy of all forms in Part B; and
One	Additional copy of Census Tables (when required).

PACKAGING:	<ul style="list-style-type: none">• Place each copy of the application and attachments in an appropriate sized, 3-ring loose-leaf binder.• Place an identifying label on both the cover and spine of the loose-leaf-binder• Clearly label the “original” and the “copy”• Paginate every page• Use tabbed pages or other clearly-marked separating devices to mark attachments--<u>do not use adhesive stickers or flags--these devices are easily misplaced or lost</u>
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BEFORE YOU MAIL THE APPLICATION	<ul style="list-style-type: none"> • Check each set of the application for completeness • Make sure all the attachments are included • Ensure that all pages (including attachments) are numbered consecutively • Ensure that the original application contains all original signatures on the appropriate forms
HOUSING ELEMENT CDBG COMPLIANCE	<ul style="list-style-type: none"> • In order to be eligible for award, all applicants must be in CDBG compliance with their Housing Element no later than December 3, 2006. <u>Call Paul McDougall at 916-322-7995</u> if you do not know the status of your housing element. Absolutely no extensions for compliance can be granted beyond December 3, 2006.
MAILING INFORMATION	<p style="text-align: center;">Mailing Address:</p> <p>State Community Development Block Grant Program Department of Housing and Community Development P. O. Box 952054, MS 330 Sacramento, CA 94252-2054</p> <p style="text-align: center;">Street Address:</p> <p>1800 3rd Street, Suite 330 Sacramento, CA 95814</p>
FOR FURTHER INFORMATION:	<p>Telephone: (916) 552-9399</p> <p>Fax: (916) 327-8823</p> <p>Website: www.hcd.ca.gov/ca/cdbq/about.html</p>

**General
Admin. and
Activity
Delivery
Percentage
Limitations**

Part of this application consists of tables in which we ask applicants to allocate the grant funds that will be spent on general administration of the grant and on “activity delivery” (activities related to the direct implementation of the grant). Applicants may choose to make a commitment of local funds in these cost categories as a means of achieving points under the scoring category of Leverage (see NOFA for more information about the scoring categories).

CDBG has established limits on the amount of funds that can be requested for general administration and activity delivery.

- **General Administration (GA)**

GA includes costs for general grant administration, such as office space and equipment, accounting/fiscal, travel, and program reporting to CDBG. See Appendix E for cost categories. Under Federal and State law, the Department may allow grantee jurisdictions up to 7½ percent of their CDBG funds for GA. However, jurisdictions are not prohibited from committing additional local, non-CDBG resources to GA beyond the 7½ percent.

Applicant jurisdictions will receive points for local administrative contributions (leverage), not to exceed 10 percent of the grant amount. This 10 percent calculation will take into account the CDBG dollars requested for GA, as illustrated in the following examples.

Example 1	
<p>Example 1</p> <p>7½ percent CDBG GA and 2½ percent local funds</p>	<p>Jurisdiction A requests \$500,000 and proposes using 7½% of the CDBG award (\$37,500) for general grant administration. Jurisdiction A could receive competitive credit for up to \$12,500 in local administrative services (local leverage) contributed to the grant per the following formula:</p> <p>10% of the \$500,000 grant = \$50,000 maximum allowable for General Administration.</p> <p>\$37,500 (7½% CDBG) + \$12,500 (2½% Local Commitment) = \$50,000</p>
Example 2	
<p>Example 2</p> <p>A portion of CDBG GA and a greater portion of local funds</p>	<p>If Jurisdiction B proposes using less than 7½% of the CDBG grant for general administration, it may receive credit for committing up to the 10% total as illustrated below:</p> <p>Jurisdiction B requests \$500,000 and proposes using 5% of the CDBG award (\$25,000) for general grant administration. Jurisdiction B could receive competitive credit for up to \$25,000 in local administrative services (local leverage) contributed to the grant per the following formula:</p> <p>10% of the \$500,000 grant = \$50,000 maximum allowable for General Administration.</p> <p>\$25,000 (CDBG) + \$25,000 (Local Commitment) = \$50,000</p> <p><i>Note: Jurisdiction B would be more competitive than Jurisdiction A in the category of local leverage if these were the only local contributions.</i></p>

- **Activity Delivery (AD)**

AD means the costs associated with carrying out the activity, such as marketing, eligibility determinations, preparing loan documents, preparing final plans and specifications, etc. The amount of grant funds that can be allocated to Activity Delivery varies depending on the proposed activity. See Appendices for guidance on eligible costs for CDBG activities.

This year the applicant will not need to determine activity delivery costs. CDBG staff will do the calculations as part of the final contract processing. If the jurisdiction will be committing local or private funds to pay for part or some of the administration, then this amount will be included in the final calculations and included in the grant agreement.

Once in the grant agreement, the grantee will have the ability to move some of the budgeted activity delivery funds into the activity if they are not needed or more activity dollars are required.

The percentage amount is calculated on the amount requested for the activity, not the total grant amount.

The Application Checklist **must be completed and submitted with the application**. In addition, an Activity Checklist must be completed for each activity in the application. These checklists serve the following purposes:

- The applicant's table of contents; and
- Provides the order in which the application must be organized and submitted; and
- Provides a checklist to ensure that all required documentation (for each activity) is included in the application.

***Instructions for PART A -
APPLICATION SUMMARY FORMS***

The Application Summary is mostly self-explanatory. Information has been provided where needed for clarification.

PART A. Application Summary Forms

1.a Application Information

Complete all required information in this section.

Joint applications must have two application summary pages one for each applicant.

1.b Authorized Representative Information

Complete all required information pertaining to the jurisdiction's authorized representative, as stated in the authorizing resolution.

IMPORTANT: The Representative authorized in the application's resolution must sign here in Blue Ink.

1.c. Application Contact Information

Please provide the required information for the contact person for this application.

**Instructions for PART A -
APPLICATION SUMMARY FORMS (continued)**

2. Requested Funding by Activity

Itemize the funds requested for each proposed activity in the application. One or all activities may be applied for but some will be more competitive than others.

Entries for specific activities:	Please anticipate the predominance of funds to be spent on single-family programs versus multi-unit rehabilitation projects. It is preferable for you to request all rehabilitation funds for this predominant unit type. Funds may not be moved between these two different activities.
Entries for specific activities (continued):	<p>If proposing more than one activity,:</p> <ul style="list-style-type: none"> • Enter the proposed amount to be spent on each activity, • indicate who will operate the program (City/County staff or other), • indicate whether this activity is a result of a CDBG Planning Activity, and • show the number of the target population group being served by the activity as shown in part 5.

3. 2000 Census Data

2000 Census data is needed for **each** proposed activity.

For each activity, check whether the proposed activity will be jurisdiction-wide or confined to a target area. If you checked “jurisdiction-wide,” you do **not** need to provide Census Tract nor Census Block Group data.

If you checked “target area,” select the smallest unit of census data that encompasses your proposed target area. If your target area is completely within a Census Block Group, identify that Block Group. If your target area crosses boundary lines for more than one Census Block Group, identify all of those Census Block Groups.

The Housing Acquisition/Housing Rehabilitation Combination Option can **only** be jurisdiction-wide.

4. Legislative Representative Information

If the applicant is in more than one district, list all of the district numbers and appropriate Legislative Representatives’ names.

The Department will notify all legislators of funding decisions.

**Instructions for PART B – REQUIRED CERTIFICATION & DOCUMENTATION
and
PART C – CAPACITY & OTHER FUNDING SOURCES**

PART B. Required Certifications and Documentation

Submit the completed pages from Part B. with all required back up documentation. Also include the properly completed forms and documents from the Appendices in the back of this application package.

PART C. Capacity and Leverage Funding Sources for Activities

1. Capacity

Indicate whether you have had any CDBG grants for any of the years 2002 through 2005.

If “Yes”, then indicate funding allocation(s) **and STOP**. NO further documentation is needed. **Do not answer question #2.**

If “No”, then answer question #2. You must attach supporting documentation to show grantee staff experience or Consultant letter of interest and documentation of their staff experience.

2. Information and Documentation of Leverage, State and Federal Funding Sources

The Department will award points in two categories of other funding sources (leverage): **local** financial contributions and **private** financial contributions. The most competitive applications will have both local and private financial commitments (leverage).

Please Note: Successful applicants will be held to all committed local and private contributions (leverage). Failure to secure the stated financial contributions will result in performance penalties on future applications and/or other Department action.

- For Housing Acquisition and Housing Rehabilitation Programs, leverage will be evaluated on a per unit basis.
- All leverage must be expended during the term of the CDBG contract.
- If the leverage is committed by an entity that receives State or Federal funding, explain the source of the leverage funds.
- If the contributed funds were derived from a State or Federal source but have lost their identity as such, submit documentation to this effect to have the funds counted as leverage.

**Instructions for
PART C –
CAPACITY & OTHER FUNDING SOURCES (continued)**

- Value of real property. If site control and value are well documented, we will count the entire value of real property as leverage in a housing new construction project. However, we will not double-count this value by also counting any loans that will be used to purchase this land. Documentation needs to be in file at time of monitoring.

For establishing the value of real property, the following may be used:

- Appraisals which **are less than one year old** (this is the preferred documentation for establishing the value of real property);
 - A Purchase Agreement signed by all involved parties;
 - The County Tax Assessor's value may be used, as documented on a property tax bill or equivalent document.
- All leverage must be directly linked to the CDBG activity for which funds are being sought. For example, the commitment of operating subsidies or supportive services will not count as leverage if CDBG funds are being sought for the development of a rental housing new construction project.
 - We will not double-count construction and take-out financing for a project-- please specify which of these commitments, and in what amount, you want counted towards leverage.

A. LOCAL Funding Sources for Activities

Only funding shown in a local funding resolution from a local governing body will be accepted. For all activities included in the application, clearly identify the Use of Funds, Source of Funds (with Resolution #), Funding Type, Dollar Amount Committed, Commitment Date, and Page Number in the Application where the local Resolution is located. (Original application must contain an original or certified original Resolution.)

- Local Redevelopment Agency funds are an acceptable local contribution. If you use these funds, you must attach a separate RDA Resolution (original or certified original).
- Show only those funds that originated at the local level; do not show funds that come from state or federal sources on this page.
- If the applicant is a City and the County in which that City is located makes a contribution to this application, the County funds will be counted as a local contribution (as long as the source of County money is not state or federal funds).

Instructions for
PART C –
CAPACITY & OTHER FUNDING SOURCES (continued)

- Program Income is not leverage.
- In-kind contributions. Jurisdictions may choose to contribute some form of in-kind services. This could be staff time or the value of other administrative services. If you use in-kind, specify the dollar value and whether and how much you are contributing to General Administration (GA) and/or Activity Delivery (AD). Be sure that these contributions are clearly identified in the local Resolution. (See Introduction section of Application for information on percentage limits for GA and AD.)
- Fee waivers. If the local contribution includes fee waivers, show the cost of the fees being waived on this chart.
- The Welfare Property Tax Exemption will **not** be allowed as leverage because it is not discretionary.
- Fee deferrals. If the local contribution includes fee deferrals, the leverage value of the deferrals will be based on “net present value,” for the period of the deferral, at the approximate cost of funds. Please attach your calculations if applicable.
- Infrastructure improvements. If the jurisdiction proposes infrastructure improvements as a local contribution, this work must be related to the proposed CDBG activity. For example, if a jurisdiction proposes to use redevelopment agency revenues to fund infrastructure improvements in the jurisdiction, points will only be awarded if these improvements are done in conjunction with the CDBG-funded activity.

Points will **not** be awarded if the CDBG activity is in one section of a jurisdiction and infrastructure improvements are being done in another part of the community. In the section of this application where you describe the proposed activity, tell us how this local complementary activity is related to the CDBG activity.

- Highway Users Taxes (gas taxes). If the jurisdiction proposes to use gas taxes in support of a housing new construction activity, the identified gas tax amount must be restricted to either: 1) the street(s) on which CDBG-assisted units will be located, or 2) work reasonably required as a condition of project development approval.

If you are proposing Housing Rehabilitation and/or Housing Acquisition activities, then please indicate the number units to be assisted.

**Instructions for
PART C –
CAPACITY & OTHER FUNDING SOURCES (continued)**

B. PRIVATE Funding Sources for Activities

For all activities included in the application, clearly identify the Use of Funds, Source of Funds Funding Type, and Dollar Amount, in the leverage chart.

Letters of commitment are optional and are **not** required in the application but documentation of leverage will be reviewed at monitoring and performance points will be deducted from future applications if leverage documentation is not available.

- Funds from private organizations (including non-profits). If a non-governmental organization is contributing funds and the source of those funds is State or Federal funding, the contribution will not be counted. Be sure to clearly indicate the source of such contributions and document them for monitoring.
- Sweat equity contributions. Sweat equity is based on hours worked and will be valued at \$10 per hour.

Formula: ____ Hours x \$10 per hour = \$ ____ = Total Sweat Equity

Note: In order to receive leverage credit for sweat equity, must comply with all lead-based paint regulations. For housing rehabilitation and homebuyer acquisition activities, property owners **must fulfill one** of the following:

- Take a one day, HUD approved, work safe class; or
 - Perform activities that do not trigger lead-based paint regulations; or
 - Work on a home completed after January 1, 1978.
- The leverage value of developer fee deferrals will be based on “net present value” for the period of the deferral, at the approximate cost of funds. Please attach your calculations if applicable.
- Volunteer labor and/or donated materials. If the jurisdiction shows volunteer labor and/or donated materials as a private leverage contribution, documentation must be maintained in your files for monitoring purposes. -Provide a letter or other documentation that clearly shows how the value of the labor and materials was calculated. Statements such as "based on past experience" for labor calculations are not adequate. If documentation of dollar value for labor is not available at monitoring, CDBG will assign a value of \$10 per hour.

Instructions for
PART C –
CAPACITY & OTHER FUNDING SOURCES (continued)

- Contributions to a project from a program administrator may be a conflict of interest and taint a competitive procurement process. Please contact your CDBG Representative to discuss this issue if you anticipate contracting out program administration and a contribution from a potential program administrator is anticipated.
- Contributions towards payment of salaries and purchase of new supplies, equipment, inventory, or operating expenses for the grant term may be counted as leverage.
- If the proposed activity is an increase in existing service(s), leverage contributions associated with the increase will be counted for assigning a score for leverage.
- On the funding sources chart, when claiming leverage credit for salaries, inventory, and operating expenses, leverage must be expended during grant term. please clearly state the time period for which the leverage is claimed. For example, "United Way - Shelter Coordinator Salary (one year)," or "Safeway - increase in donated food (two years)."
- Other potential private leverage sources include, but are not limited to: the Federal Home Loan Bank Board Affordable Housing Program (AHP), conventional lenders, donated material, and foundation grants.

C. STATE Funding Sources for Activities

Although the CDBG Program cannot count state/federal funding sources as leverage, it is important to identify those funds so that HCD can more accurately report on this leverage to the Department of Housing and Urban Development (HUD).

For each activity, please identify the CDBG Activity, Use of Funds, Source of Funds, the Dollar Amount, and state whether the funds are committed.

D. FEDERAL Funding Sources for Activities

Although the CDBG Program cannot count State/Federal funding sources as leverage, it is important to identify those funds so that HCD can more accurately report on this leverage to the Department of Housing and Urban Development (HUD).

Do not include your requested State CDBG Program funds in this or any "other funding sources" category.

Instructions for
PART C –
CAPACITY & OTHER FUNDING SOURCES (continued)

For each activity, please identify the CDBG Activity, Use of Funds, Source of Funds, the Dollar Amount, and state whether the funds are committed.

E. CDBG Program Income Committed to Activities

Applicant must show the current balance of CDBG program income (PI) on hand (should correspond to most recent PI report submitted) in this chart. List each proposed activity in the application that will be receiving a commitment of local PI funds. Show the exact amount of PI to be committed to each activity (these amounts must be the same as shown in the required governing body resolution committing the PI to the activities in the application).

All PI funds must be spent first before requesting any State CDBG funds for the proposed activity. All program income committed to activities under this grant will be incorporated into the grant agreement and must be spent within the term of the grant agreement and TIG benefit must be achieved.

Once the funding awards are announced, funded applicants must show committed PI funds by activity on PI reports and on Funds Request Forms submitted to the State.

APPLICATION CHECKLIST for ALL APPLICATIONS

NOTE: This Application Checklist & the applicable Activity Checklist(s) **must be submitted** with your completed application package. They will serve as the Table of Contents for your Application. All items listed must be submitted in the order listed.

- Enter the page number for each item that is included in the application.
- Enclose and mark each attachment. **Incomplete applications may not meet threshold review requirements.**

TITLE	Required or optional	App. Page #(s)
PART A. Application Summary Form		
• Application Summary Form	<i>Required</i>	
PART B. Required Certifications and Documentation		
• 1. - Resolution(s) of the Governing Body	<i>Required</i>	
• 2. - Statement of Assurances	<i>Required</i>	
• 3. - Housing Element CDBG Compliance	Required 12/3/06	
• 4. - Compliance with OMB Circular A-133	<i>Required</i>	
• 5. - Growth Control Information	If needed	
• 6. - Citizen Participation Information	<i>Required</i>	
• 7. - Joint Powers Agreement (See Instructions)	If needed	
• 8. - NEPA Forms for Exempt Activities ONLY	<i>Required</i>	
PART C. Capacity & Other Funding Sources		
• 1. - Capacity	<i>Required</i>	
- Resumes, duty statements, letters of interest (See Instructions)	If Needed	
• 2. - Chart showing LOCAL Funding Sources	<i>Required</i>	
• 3. - Chart showing PRIVATE Funding Sources	<i>Required</i>	
Letters of Commitment (See Instructions)	Optional	
• 4. - Chart showing State Funding Sources	<i>Required</i>	
• 5. - Chart showing Federal Funding Sources	<i>Required</i>	
• 6. - Chart showing Program Income Committed	<i>Required</i>	
Specific Activity Description Forms – (List activities proposed in this application and the page # in the application where the section begins.)		
•		
•		
•		

REQUIRED DOCUMENTATION *for* ALL APPLICATIONS

OTHER - Required Documentation	Required or optional	App. Page #(s)
The following should be placed in the inner front binder pocket of the “Original” application.		
• One additional copy of authorizing Resolution(s)	<i>Required</i>	
• One additional copy of all completed forms in Part A. and Part B. of the application.	<i>Required</i>	
• One additional copy of the Census Tables (where applicable)	<i>Required</i>	
OTHER Attachments (list any additional attachments by name and page number)		

Activity Checklist for Public Works Projects

Note: Use this checklist only if you are applying for the named activity.

Title	Required or optional	App. Page #(s)
• Activity Description (A. 1.)	<i>Required</i>	
• Need for Activity (A. 2.)	<i>Required</i>	
• Status of Site Control (required for Housing New Construction, Housing Acquisition, Community Facilities, and Public Works) (A. 3.)	<i>Required</i>	
• Level of Environmental Clearance (anticipated) (A. 4.)	<i>Required</i>	
• Detailed description of health and safety need being addressed by activity. (A. 5.)	<i>Required</i>	
• Describe how activity will eliminate the problem. (A. 6.)	<i>Required</i>	
• Financial plan to provide for long-term operation/maintenance. (A. 7.)	<i>Required</i>	
• How was health and safety need determined? (A. 8.)	<i>Required</i>	
• Documentation of Problem. (A. 9.)	<i>Required</i>	
• Attach documentation to show health and safety need. (A. 5.-8.)	<i>Required</i>	
• Targeted Income Group Benefit (B. 1.)	<i>Required</i>	
• Attach documentation for TIG Benefit: income surveys or HUD low/mod income data.	<i>Required</i>	
• Sources and Uses Form (C.)	<i>Required</i>	
• Program Readiness Chart (Part D.) Attach Proper Documentation to prove readiness. (See Instructions)	<i>Required</i>	

Activity Checklist for Housing New Construction Projects

Note: Use this checklist only if you are applying for the named activity.

Title	Required or optional	App. Page #(s)
• Activity Description (A. 1. a., b. c.)	<i>Required</i>	
• Need for Activity (A. 2. a.)	<i>Required</i>	
• Off-site improvements documentation, (See Instructions)	<i>If needed</i>	
• State Objective (A. 3.) (See Instructions)	<i>If needed</i>	
• Level of Environmental Clearance (anticipated) (A. 4.)	<i>Required</i>	
• Census Data Chart (A. 5. through 7. b.)	<i>Required</i>	
• Attach Census tables (with calculations) and/or the results of the local survey, if applicable.	<i>Required</i>	
• Waiting List Information or Market Study (A. 8.) (See Instructions)	<i>If needed</i>	
• Supplemental Information (A. 9.) (See Instructions)	<i>If needed</i>	
• Targeted Income Group Benefit (B. 1. through 4.d.)	<i>Required</i>	
• Sources and Uses Form (C.)	<i>Required</i>	
• Activity Readiness Chart (Part D) Attach Proper Documentation to prove readiness. (See Instructions)	<i>Required</i>	

ACTIVITY CHECKLIST *for* Housing Acquisition Program or Project

Note: Use this checklist only if you are applying for the named activity.

Title	Required or optional	App. Page #(s)
• Activity Description (A. 1. a., b.)	<i>Required</i>	
• Need for Activity (A. 2.)	<i>Required</i>	
• Off-site improvements documentation, (See Instructions)	<i>If needed</i>	
• State Objective (A. 3.) (See NOFA & Instructions)	<i>If needed</i>	
• Environmental Clearance (anticipated) (A. 4.)	<i>Required</i>	
• Census Data Chart (A. 5. through 7. b.)	<i>Required</i>	
• Attach Census tables (with calculations) and/or the results of the local survey, if applicable.	<i>Required</i>	
• Waiting List Information or Market Study (A. 8.) (See Instructions)	<i>If needed</i>	
• Supplemental Information (A. 9.) (See Instructions)	<i>If needed</i>	
• Targeted Income Group Benefit (B. 1. through 4.d.) Attach documentation	<i>Required</i>	
• Sources and Uses Form (C.)	<i>Required</i>	
• Activity Readiness Chart (Part D) Attach Proper Documentation to prove readiness. (See Instructions)	<i>Required</i>	

ACTIVITY CHECKLIST *for* Housing Rehabilitation Program or Project

Note: Use this checklist only if you are applying for the named activity.

Title	Required or optional	App. Page #(s)
• Activity Description (A. 1.)	<i>Required</i>	
• Need for Activity (A. 2.)	<i>Required</i>	
• Jurisdiction-wide Census Data Info. (required for jurisdiction-wide programs) (A. 4.) (See Instructions)	<i>Required</i>	
• Target Area Census Data Info. (required for target area programs <u>with</u> current survey data) (A. 4.) (See Instructions)	<i>Required</i>	
• Age of Housing Stock. (A. 5.)	<i>Required</i>	
• Overcrowding. (A. 6.)	<i>Required</i>	
• Attach copy of Housing Element pages containing jurisdiction-wide housing condition data. (A. 3) (See Instructions)	<i>Required</i>	
• Attach a copy of the summary of housing condition survey data for target area(s) and survey form used detailed map of each area surveyed. (A. 4.) (See Instructions)	<i>If needed</i>	
• Attach Proper Census Tables for Housing Stock Age and Overcrowding and show calculations. (A. 5.)	<i>Required</i>	
• Supplemental Information (A. 6.) (See Instructions)	<i>If needed</i>	
• Targeted Income Group Benefit (B. 1.a. – 2.c.) Attach documentation for TIG Benefit (See Instructions)	<i>Required</i>	
• Activity Readiness Chart (Part C.) Attach Proper Documentation to prove readiness. (See Instructions)	<i>Required</i>	
• Target Area Maps Showing <u>Each</u> Proposed Target Area. Census Maps must be used to show census block groups that Target Area are in (See Instructions)	<i>Required</i>	

ACTIVITY CHECKLIST *for* Public Service Program

Note: Use this checklist only if you are applying for the named activity.

Title	Required or optional	App. Page #(s)
• Activity Description (A. 1.)	<i>Required</i>	
• Need for Activity (A. 2. a.)	<i>Required</i>	
• Environmental Clearance (anticipated) (A. 2. b.)	<i>Required</i>	
• Serious Problem to be addressed by this activity. (A. 3.)	<i>Required</i>	
• Extent project will solve the problem. (A. 4)	<i>Required</i>	
• Attach documentation of the problem and commitments from service providers. (A. 5.)	<i>Required</i>	
• Documentation of need for NEW services. (A. 6)	<i>Required</i>	
• Documentation of need for Existing services. (A. 7)	<i>Required</i>	
• Chart for Documentation of Problem and Commitment to Provide Services. (A. 8)	<i>Required</i>	
• Copies of documentation to substantiate 1) severity of need, and 2) service provider commitments (must be on service provider organization letterhead), 3) Quantification of need (A. 8.)	<i>Required</i>	
• Targeted Income Group Benefit (B. 1. – 3.) Attach documentation for TIG Benefit (See Instructions).	<i>Required</i>	
• Activity Readiness Chart (Part C.) Attach Proper Documentation to prove readiness. (See Instructions)	<i>Required</i>	

ACTIVITY CHECKLIST for Community Facility Project

Note: Use this checklist only if you are applying for the named activity.

Title	Required or optional	App. Page #s)
• Activity Description (A. 1.)	<i>Required</i>	
• Need for Activity (A. 2.)	<i>Required</i>	
• Status of Site Control (required for Housing New Construction, Housing Acquisition, Community Facilities, and Public Works) (A. 3.)	<i>Required</i>	
• Level of Environmental Clearance (anticipated) (A. 4.)	<i>Required</i>	
• Detailed description of health and safety need being addressed by activity. (A. 5.)	<i>Required</i>	
• Describe how activity will eliminate the problem. (A. 6.)	<i>Required</i>	
• Financial plan to provide for long-term operation/maintenance of facility. (A. 7.)	<i>Required</i>	
• How was health and safety need determined? (A. 8.)	<i>Required</i>	
• Documentation of Problem. (A. 9.)	<i>Required</i>	
• Attach documentation to show health and safety need. (A. 5.-8.)	<i>Required</i>	
• Targeted Income Group Benefit (B. 1.)	<i>Required</i>	
• Attach documentation for TIG Benefit: income surveys or HUD low/mod income data.	<i>Required</i>	
• Sources and Uses Form (C.)	<i>Required</i>	
• Program Readiness Chart (Part D.) Attach Proper Documentation to prove readiness. (See Instructions)	<i>Required</i>	